Desirient Committee				COVER PAGE
Recipient Committee Campaign Statement Cover Page			Date Stamp	CALIFORNIA 460 FORM
Government Code Sections 84200-84216.5)	Statement covers period from09/20/2020	Date of election if applicable: (Month, Day, Year)	10/22/2020	Page1 of11 For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through10/17/2020	11/03/2020	133704220	
I. Type of Recipient Committee: All Committees -	Complete Parts 1, 2, 3, and 4.	2. Type of Statement:		
 ☑ Officeholder, Candidate Controlled Committee State Candidate Election Committee Recall	Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)		Special Suppler Statemen	ly Statement Odd-Year Report mental Preelection ent - Attach Form 495
3. Committee Information	I.D. NUMBER 1425324	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTE		NAME OF TREASURER		
Evelyn Chua for City Council 2020		Arsenio Iloreta MAILING ADDRESS		
		MAILING ADDICES		
STREET ADDRESS (NO P.O. BOX)		CITY Milpitas	STATE ZIP CODI CA 95035	
CITY STATE ZIP	CODE AREA CODE/PHONE	NAME OF ASSISTANT TREASUR	ER, IF ANY	
	5035 (408)728-2436			
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.	D. BOX	MAILING ADDRESS		
CITY STATE ZIP	CODE AREA CODE/PHONE	CITY	STATE ZIP COD	E AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRE	ESS	
chua4evelyn@gmail.com		ariloreta@aol.com		
 Verification I have used all reasonable diligence in preparing and review under penalty of perjury under the laws of the State of Califo 	ving this statement and to the best of my kn ornia that the foregoing is true and correct.	owledge the information contained here	ein and in the attached schedules	is true and complete. I certify
Executed on	ByArsenio Il	oreta Signature of Treasurer or Assistant Tr	reasurer	_
Executed on	By Evelyn Chu Signature of Co	a. ontrolling Officeholder, Candidate, State Measure Prop		_
Executed on	Ву	Signature of Controlling Officeholder, Candidate, Sta	te Measure Proponent	_
Executed onDate	Ву	Signature of Controlling Officeholder, Candidate, Sta	ite Measure Proponent	— FPPC Form 460 (Jan/2016)

Recipient Committee Campaign Statement Cover Page — Part 2

	COVER	PAG	E - PART	2
	FORNIA DRM		160	
Page _	2	of _	11	

Officeholder or Candidate Controlled Com	mittee	•	6.	Primarily Formed Balle	ot Measure	Committee	€	
NAME OF OFFICEHOLDER OR CANDIDATE				NAME OF BALLOT MEASURE				
Evelyn Chua								
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTR	RICT NUMBER IF APPLICABL	E)		BALLOT NO. OR LETTER	JURISDICTI	NC		
City Council Member City Council: City of	Milpitas							OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE	ZIP		Identify the controlling of	iceholder, ca	ndidate, or s	tate measure	proponent, if any
	Milpitas CA	95035		NAME OF OFFICEHOLDER, CAN	IDIDATE OR DE	POPONENT		
Related Committees Not Included in this S not included in this statement that are controlled by yo contributions or make expenditures on behalf of your of	u or are primarily formed t			OFFICE SOUGHT OR HELD			DISTRICT NO	. IF ANY
COMMITTEE NAME	I.D. NUMBER						ı	
NAME OF TREASURER	CONTROLLED COMMITT		7.	Primarily Formed Can officeholder(s) or candidate(s)				
	☐ YES ☐ NO							
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	BOX)			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	JGHT OR HELD	SUPPORT OPPOSE
CITY STATE ZIP	CODE AREA COD	DE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	JGHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	JGHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITT			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	JGHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	BOX)	<u></u>						
CITY STATE ZIP	CODE AREA COD	DE/PHONE		Δtta	ch continuati	on sheets if	necessarv	
				Attu	<i>00</i>	onooto n		

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Statement covers period **CALIFORNIA FORM** 09/20/2020 from _ Page ____3 ___ of ____11 10/17/2020 through _ I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER 1425324 Evelyn Chua for City Council 2020

Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)		TOTALTHIS PERIOD			COLUMN B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
1. Monetary Contributions Schedule A, Line 3	\$	4,173.00	\$	9,897.00			
2. Loans Received Schedule B, Line 3		0.00		16,000.00	1/1 through 6/30 7/1 to Date		
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	4,173.00	\$	25,897.00	20. Contributions Received \$ \$		
4. Nonmonetary Contributions Schedule C, Line 3		0.00		0.00	21. Expenditures		
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	4,173.00	\$	25,897.00	Made \$ \$		
Expenditures Made					Expenditure Limit Summary for State		
6. Payments Made Schedule E, Line 4	\$	6,891.48	\$	21,886.64	Candidates		
7. Loans Made Schedule H, Line 3		0.00		0.00	22. Cumulative Expenditures Made*		
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	6,891.48	\$	21,886.64	(If Subject to Voluntary Expenditure Limit)		
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3		0.00		0.00	Date of Election Total to Date		
10. Nonmonetary Adjustment Schedule C, Line 3		0.00		0.00	(mm/dd/yy)		
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$	6,891.48	\$	21,886.64	\$		
Current Cash Statement					\$		
12. Beginning Cash Balance	\$	6,756.84	То	calculate Column B, add			
13. Cash Receipts Column A, Line 3 above		4,173.00		nounts in Column A to the rresponding amounts			
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	m Column B of your last	*Amounts in this section may be different from amounts reported in Column B.		
15. Cash Payments		6,891.48		oort. Some amounts in blumn A may be negative			
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	4,038.36	fig	ures that should be			
If this is a termination statement, Line 16 must be zero.			ре	btracted from previous riod amounts. If this is a first report being filed			
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	for	this calendar year, only rry over the amounts			
Cash Equivalents and Outstanding Debts			fro	m Lines 2, 7, and 9 (if			
18. Cash Equivalents See instructions on reverse	\$	0.00	an	у).			
19. Outstanding Debts							
	·				FPPC Form 460 (Jan/		
					FPPC Advice: advice@fppc.ca.gov (866/2		

16) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

Schedule A Monetary Contributions Received			ts may be rounded whole dollars.	Statement cover from09/20/2 through10/17/2	020	CALIFORNIA 460		
	DNS ON REVERSE			through		Page _		
NAME OF FILER Evelyn Chua	for City Council 2020					I.D. NUM 142532		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YEA (JAN. 1 - DEC. 3	AR	PER ELECTION TO DATE (IF REQUIRED)	
09/20/2020	Divina Lingad Milpitas, CA 95035	IND COM OTH PTY SCC	Fitness Instructor Milpitas Sports Center	250.00	25	0.00		
09/21/2020	Romualdo Geronimo Milpitas, CA 95035		retired retired	100.00	10	0.00		
09/21/2020	Joey McCarthy Los Gatos, CA 95030		Real Estate Development The McCarthy Ranch	250.00	25	0.00		
09/21/2020	Cady Yu Milpitas, CA 95035	IND COM OTH PTY SCC	Manager Bay View Golf Club	250.00	25	0.00		
09/21/2020	Jason Zhu Milpitas, CA 95035		Owner Acadya Realty Invesrment LLC	250.00	25	0.00		
		SCC	SUBTOTAL	\$ 1,100.00				

Schedule A Summary

*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity)

PTY - Political Party

4,173.00

SCC - Small Contributor Committee

SCHEDULE A (CONT.)

CALIFORNIA 4 0 0

Statement covers period

•		to whole (dollars.	from09/20/		FORM 460
				through10/17/	<u>2020</u> P :	age5 of11
NAME OF FILER					1.1	D. NUMBER
Evelyn Chua	for City Council 2020				1	425324
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DA CALENDAR YEAR (JAN. 1 - DEC. 31)	TO DATE
09/23/2020	Trevor Brown San Ramon, CA 94583		Real Estate Development Trumark Homes	250.00	250.	00
09/25/2020	Welyn, Inc. Saratoga, CA 95070	☐IND ☐COM ☑OTH ☐PTY ☐SCC		225.00	225.	00
10/01/2020	Richard Tran Milpitas, CA 95035		Mayor City of Milpitas	250.00	250.	00
10/01/2020	J. Felix Velador San Jose, CA 95135		handyman self-employed	150.00	150.	00
10/01/2020	Juanita Velador San Jose, CA 95135		Intero Realtor	150.00	150.	00
			SUBTOTAL	1,025.00		

Amounts may be rounded

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Monetary	Contributions Received	Amounts may be rounded to whole dollars. Statement covers period from09/20/2020		CALIFORNIA 460			
				through10/17/	2020	Page	6 of11
IAME OF FILER						I.D. NUM	BER
velyn Chua f	For City Council 2020					142532	4
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR 31)	PER ELECTION TO DATE (IF REQUIRED)
10/04/2020	Duoying Liu Milpitas, CA 95035		Engineer SK Hynix Memory Solution	100.00	10	00.00	
10/05/2020	Milpitas Firefighters PAC (ID# 941250) Sacramento, CA 95841	□IND IND OTH PTY SCC		250.00	2!	50.00	
10/06/2020	Jasjeet Cheema Fremont, CA 94555		Businessman self-employed	250.00	2!	50.00	
10/06/2020	Balbir Singh Dhillon San Jose, CA 95116		Realtor self-employed	100.00	10	00.00	
10/06/2020	Jaswant Singh Hothi Milpitas, CA 95035	IND COM OTH PTY SCC	Businessman self-employed	250.00	2!	50.00	
			SUBTOTAL	950.00			

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Rainbow Childhood Dev Center

Milpitas, CA 95035

Milpitas, CA 95035

Divina Lingad

Schedule A (Continuation Sheet) Monetary Contributions Received		Amounts may to whole		Statement covers period from09/20/2020			CALIFORNIA FORM 460		
				through10/	.7/2020	Page .	7 of11		
NAME OF FILER						I.D. NU	MBER		
Evelyn Chua	for City Council 2020					14253	324		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE T CALENDAR \ (JAN. 1 - DEC	YEAR	PER ELECTION TO DATE (IF REQUIRED)		
10/06/2020	Rajeev Madnawat Milpitas, CA 95035		Attorney NXP Semiconductors	250.	0.0	250.00			
10/06/2020	Pritpal Singh Milpitas, CA 95035		Businessman self-employed	250.	0.0	250.00			

<u> </u>	<u> </u>	SUBTOTAL\$ 500	.00	
	□IND □COM □OTH □PTY □SCC			
	□OTH □PTY □SCC			

Fitness Instructor

Milpitas Sports Center

 \square IND

XIND

□сом

□сом ▼ OTH ☐ PTY □scc

*Contributor Codes

IND - Individual

10/12/2020

10/16/2020

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

PTY – Political Party SCC – Small Contributor Committee

250.00

250.00

250.00

-250.00

of ___11___

CUMULATIVE
CONTRIBUTIONS
TO DATE

CALENDAR YEAR
\$ 16,000.00
PER ELECTION**
\$ G2020 16,000.00

\$\frac{16,000.00}{PER ELECTION **}\$\$\$ \$\frac{92020}{16,000.00}\$\$\$\$\$

CALENDAR YEAR

PER ELECTION **

Schedule B – Part 1 Loans Received	Amo	1	Statement cov	CALIFORI FORM			
SEE INSTRUCTIONS ON REVERSE				1	through	7/2020	Page8
NAME OF FILER							I.D. NUMBER
Evelyn Chua for City Council 2020							1425324
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN
Evelyn Chua Milpitas, CA 95035	HR Consultant Self			PAID \$ 0.00 FORGIVEN	\$1,000.00	% RATE	\$1,000.00
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$1,000.00	\$0.00	\$0.00	DATE DUE	\$0.00	02/20/2020 DATE INCURRE
Evelyn Chua Milpitas, CA 95035	HR Consultant Self			PAID \$ 0.00 FORGIVEN	\$15,000.00	% RATE	\$_15,000.00
[†] ☑ IND □ COM □ OTH □ PTY □ SCC		\$_15,000.00	\$	\$0.00	DATE DUE	\$0.00	06/16/2020 DATE INCURRE
[†] □ IND □ COM □ OTH □ PTY □ SCC		\$	\$	PAID FORGIVEN	\$	%%	\$ DATE INCURRE

SUBTOTALS \$

Schedule B Summary

(Enter (e) on Schedule E, Line 3)

0.00

16,000.00\$

0.00\$

0.00\$

1.	Loans received this period\$ (Total Column (b) plus unitemized loans of less than \$100.)	5 _	0.00
2.	Loans paid or forgiven this period\$ (Total Column (c) plus loans under \$100 paid or forgiven.) (Include loans paid by a third party that are also itemized on Schedule A.)	3 _	0.00
3.	Net change this period. (Subtract Line 2 from Line 1.)	i	0.00 (May be a negative number)

†Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

*Amounts forgiven or paid by another party also must be reported on Schedule A. ** If required.

Enter the net here and on the Summary Page, Column A, Line 2.

FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

Schedule E
Payments Made

	SCHEDULE E			
Statement covers period	CALIFORNIA / CC			
from09/20/2020	FORM TOU			
through10/17/2020	Page9 of11			
	I.D. NUMBER			
	1425324			

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Evelyn Chua for City Council 2020

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Docs and Images Santa Clara, CA 95050		HOME PAGE DE	SIGN & DEVELOPMENT - MAINTENANCE	479.20
SCC Registrar of Voters San Jose, CA 95112		Voter list		129.00
Facebook Menlo Park, CA 94025	WEB			529.77

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL\$ 1,137.97

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)\$_	6,891.48
2. Unitemized payments made this period of under \$100\$_	0.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A. Line 6.)	6,891.48

Schedule E	
(Continuation Sheet))
Payments Made	

Statement covers period		CALIFORNIA 160
from	09/20/2020	FORM 400
through_	10/17/2020	Page10 of11
		I.D. NUMBER
		1425324

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Evelyn Chua for City Council 2020

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs MTG meetings and appearances campaign consultants RFD returned contributions CNS CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries petition circulating CVC civic donations PET TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals

ND fundraising events

POL polling and survey research

TRS staff/spouse travel, lodging, and meals

LEG legal defense PRO professional services (legal, accounting) VOT voter registration

LIT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
The Milpitas Beat Milpitas, CA 95035		For print ad in The Milpitas Beat	800.00
PayPal San Jose, CA 95131		Account Service	6.99
Docs and Images Santa Clara, CA 95050		Graphic Design 30-Day Unlimited Designs	299.00
Docs and Images Santa Clara, CA 95050		Letter Size, Pack of 10,000, Card Stock: 1001b Gloss	1,921.78
Docs and Images Santa Clara, CA 95050		EDDM Retail Processing and Drop Off to USPS Milpitas	375.00
		CUDTOTAL	

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

3,402.77

Schedule E	
(Continuation Sheet))
Payments Made	

Statement covers period		CALIFORNIA 160
from	09/20/2020	FORM 400
through	10/17/2020	Page11 of11
		I.D. NUMBER
		1425324

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Evelyn Chua for City Council 2020

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs MTG meetings and appearances campaign consultants RFD returned contributions CNS CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals

FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals travel, lodging and survey research TRS staff/spouse travel, lodging and survey

LEG legal defense PRO professional services (legal, accounting) VOT voter registration

T campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Docs and Images Santa Clara, CA 95050		EDDM Postage - Set 1 and 2;Set 2 Total Deliveries 4832Set 1 Total Deliveries 4916	1,915.86
Docs and Images Santa Clara, CA 95050		DIFFERENTIAL WORK HOURS FEE FOR ON-DEMAND DESIGN	299.00
PayPal San Jose, CA 95131		total of fees charged for contributions made through Paypal	135.88

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

2,350.74

Recipient Committee Campaign Statement Cover Page Government Code Sections 84200-84216.5)	Statement covers period from07/01/2020	Date of election if applicable: (Month, Day, Year)	E-Filed 09/24/2020 15:45:37 Filing ID:	CALIFORNIA 460 Page 1 of 14 For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through09/19/2020	11/03/2020	192998595	
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	rimarily Formed Ballot Measure ommittee) Controlled) Sponsored //so Complete Part 6) rimarily Formed Candidate/ fficeholder Committee //so Complete Part 7)	2. Type of Statement:	Specermination) State	rterly Statement cial Odd-Year Report plemental Preelection ement - Attach Form 495
S Committee Information	. NUMBER .425324	Treasurer(s) NAME OF TREASURER Arsenio Iloreta MAILING ADDRESS		
STREET ADDRESS (NO P.O. BOX)		CITY Milpitas	STATE ZIP C	
CITY STATE ZIP COI Milpitas CA 9503! MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO	5 (408)728-2436	NAME OF ASSISTANT TREASUR	RER, IF ANY	
OPTIONAL: FAX / E-MAIL ADDRESS chua4evelyn@gmail.com	DE AREA CODE/PHONE	OPTIONAL: FAX / E-MAIL ADDR ariloreta@aol.com	STATE ZIP C	ODE AREA CODE/PHONE
 Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California 		owledge the information contained her	rein and in the attached schedu	ules is true and complete. I certify
Executed on	By Arsenio Il	Signature of Treasurer or Assistant		
Executed on	Signature of Co	a. ontrolling Officeholder, Candidate, State Measure Pro Signature of Controlling Officeholder, Candidate, St		
Executed onDate	Ву	Signature of Controlling Officeholder, Candidate, St	tate Measure Proponent	 FPPC Form 460 (Jan/2016)

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2									
CALIF FC	ORNIA ORM		160						
Page _	2	of _	14						

fficeholder or Candidate Controlled Committee				Primarily Formed Balle	ot Measure	Committee	€	
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE					
Evelyn Chua								
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTR	RICT NUMBER IF APPLICABL	E)		BALLOT NO. OR LETTER	JURISDICTI	NC		
City Council Member City Council: City of	Milpitas							OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP Milpitas CA 95035				Identify the controlling of	iceholder, ca	ndidate, or s	tate measure	proponent, if any
				NAME OF OFFICEHOLDER, CAN	IDIDATE OR DE	POPONENT		
Related Committees Not Included in this S not included in this statement that are controlled by yo contributions or make expenditures on behalf of your of	u or are primarily formed t			OFFICE SOUGHT OR HELD			DISTRICT NO	. IF ANY
COMMITTEE NAME	I.D. NUMBER						ı	
NAME OF TREASURER	CONTROLLED COMMITT		7.	Primarily Formed Can officeholder(s) or candidate(s)				
	☐ YES ☐ NO							
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	BOX)			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	JGHT OR HELD	SUPPORT OPPOSE
CITY STATE ZIP	CODE AREA COD	DE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	JGHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	JGHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITT			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	JGHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	BOX)	<u></u>						
CITY STATE ZIP	CODE AREA COD	DE/PHONE		Δtta	ch continuati	on sheets if	necessarv	
				Attu	<i>00</i>	onooto n		

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SUMMARY PAG	Ε	
SOMINAN I FAG	_	

Stateme	nt covers period	CALIFORNIA 160
from	07/01/2020	FORM TOO
through	09/19/2020	Page3 of14
		I.D. NUMBER
		1405204

Evelyn Chua for City Council 2020 1425324 Column A **Calendar Year Summary for Candidates** Column B Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTAL TO DATE **General Elections** \$ 5,724.00 1/1 through 6/30 7/1 to Date 16,000.00 20. Contributions 5,454.00 21,724.00 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ _____ Received 21. Expenditures Made \$ 21,724.00 **Expenditures Made Expenditure Limit Summary for State** Candidates 7. Loans Made Schedule H, Line 3 0.00 22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date (mm/dd/yy) 0.00 0.00 \$ 14,995.16 **Current Cash Statement** To calculate Column B, add 5,454.00 amounts in Column A to the 13. Cash Receipts Column A, Line 3 above corresponding amounts *Amounts in this section may be different from amounts 0.00 14. Miscellaneous Increases to Cash Schedule I. Line 4 from Column B of your last reported in Column B. report. Some amounts in 12,989.79 Column A may be negative 6,756.84 figures that should be 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed for this calendar year, only 0.00 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ carry over the amounts from Lines 2, 7, and 9 (if **Cash Equivalents and Outstanding Debts** anv). 18. Cash Equivalents See instructions on reverse \$ _____

FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

Schedule		Amoun	to may be rounded					SCHEDULE
Monetary	Contributions Received	utions Received Amounts may be rounded to whole dollars. Statement cover from			CALIFORNIA 460			
SEE INSTRUCTION	ONS ON REVERSE			throug	h <u>09/19/2</u>	020	Page	4 of14
NAME OF FILER							I.D. NI	JMBER
Evelyn Chua	for City Council 2020			_			1425	324
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECE	MOUNT IVED THIS ERIOD	CUMULATIVE TO CALENDAR N (JAN. 1 - DEC	/EAR	PER ELECTION TO DATE (IF REQUIRED)
07/01/2020	Carmen Montano MILPITAS, CA 95035		retired retired		100.00		100.00	
07/02/2020	Jeffrey Hogg MILPITAS, CA 95035		retired retired		250.00		250.00	
07/03/2020	An Bui Saratoga, CA 95070		Director, Supply Chain Riverbed Company		250.00		250.00	
07/17/2020	Dana Reyes San Jose, CA 95132		self-employed self-employed	250.00		250.00 2!		
07/18/2020	Lawrence Ciardella MILPITAS, CA 95035	☑IND □COM □OTH □PTY □SCC	retired retied		200.00		200.00	
			SUBTOTAL	\$	1,050.00			
	A Summary						ntributor (

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.)\$ ___ 4,750.00 2. Amount received this period – unitemized monetary contributions of less than \$100\$ 704.00 3. Total monetary contributions received this period.

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

5,454.00

SCC - Small Contributor Committee

Amounts may be rounded

SCHEDULE A (CONT.)

Statement covers period

Monetary Contributions Received		Amounts may be rounded to whole dollars.			ers period	CALIFORNIA 460			
				through 09/19/	2020	Page5	of14		
IAME OF FILER			L			I.D. NUMBER			
Evelyn Chua f	For City Council 2020					1425324			
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DEC. (JAN. 1 - DEC. 3)	AR	PER ELECTION TO DATE IF REQUIRED)		
07/18/2020	Victor San Vicente MILPITAS, CA 95035		retired retired	200.00	200.00		200.00		
07/29/2020	Divina Lingad Milpitas, CA 95035		Fitness Instructor Milpitas Sports Center	250.00	25	0.00			
07/30/2020	Lynn Cruz MILPITAS, CA 95035		N/A N/A	100.00	10	0.00			
07/30/2020	Lavonne Zamora MILPITAS, CA 95035		Group exercise coach 24 Hour Fitness	250.00	25	0.00			
08/10/2020	Tingna Xu MILPITAS, CA 95035	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Homemaker N/A	250.00	25	0.00			
			SUBTOTAL	1,050.00					

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Monetary Contributions Received		Amounts may to whole		ers period 2020		FORM 460			
				through 09/19/	2020	Page	6 of <u>14</u>		
NAME OF FILER						I.D. NUM	BER		
Evelyn Chua f	For City Council 2020					142532	4		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT CUMULATIVE TO CALENDAR YI PERIOD (JAN. 1 - DEC.		AR	PER ELECTION TO DATE (IF REQUIRED)		
08/12/2020	You-Wen Yi MILPITAS, CA 95035		Retired N/A	100.00	100.00 1		100.00		
08/13/2020	Cody Chen MILPITAS, CA 95035		Engineer n/a	100.00	10	00.00			
08/13/2020	Sandy Chen MILPITAS, CA 95035	☑IND □COM □OTH □PTY □SCC	Accountant USI	250.00	25	50.00			
08/13/2020	Yin Cheng MILPITAS, CA 95035		Real estate agent Legend Realty & Finance Group	200.00	20	00.00			
08/13/2020	Armando Gomez MILPITAS, CA 95035		Principal Armando Gomez Consulting	250.00	25	50.00			
			SUBTOTALS	900.00					

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Monetary Contributions Received		Amounts may to whole o		Statement cove	•		orm 460				
				through09/19/	2020	Page	7 of <u>14</u>				
NAME OF FILER						I.D. NUMI	BER				
Evelyn Chua f	or City Council 2020					142532	4				
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD CALENDAR YI (JAN. 1 - DEC.		AR	PER ELECTION TO DATE (IF REQUIRED)				
08/13/2020	Tao Huang Milpitas, CA 95035		Accountant Self-employed	100.00	.00.00		.00 100.0		0 100.00		
08/13/2020	Nan ji MILPITAS, CA 95035		Self-employed Self-employed	100.00	10	00.00					
08/13/2020	Xin Liu MILPITAS, CA 95035		Realtor Self-employed	250.00	25	50.00					
08/13/2020	Hua Jie Zhong MILPITAS, CA 95035		Self-employed Self-employed	150.00	15	50.00					
08/14/2020	Yi Chen MILPITAS, CA 95035		Engineer Crystal Instruments	100.00	10	00.00					
			SUBTOTAL	\$ 700.00							

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

				from07/01/	2020	FC	RM	400
				through 09/19/	2020	Page _	8 of	14
NAME OF FILER						I.D. NUN	/BER	
Evelyn Chua f	For City Council 2020					142532	24	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR . 31)	TOI	LECTION DATE QUIRED)
08/17/2020	Zhimei Wu Milpitas, CA 95035		self-employed self-employed	100.00	1	00.00		
08/21/2020	Rosana Cacao Milpitas, CA 95035	⊠IND □COM □OTH □PTY □SCC	Supervisor City of Milpitas	250.00	2	50.00		
08/21/2020	Segundo Cacao Milpitas, CA 95035		retired retired	200.00	2	00.00		
08/21/2020	Joseph Callahan Pleasanton, CA 94566		Callahan Properties owner	250.00	2	50.00		
08/21/2020	Mark Robson Los Gatos, CA 95030		Robson Homes Owner	250.00	2	50.00		
			SUBTOTAL	\$ 1,050.00				

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

of <u>14</u>

CUMULATIVE
CONTRIBUTIONS
TO DATE

CALENDAR YEAR
\$ 16,000.00
PER ELECTION**

CALENDAR YEAR
\$ 16,000.00
PER ELECTION **
\$ G2020 16,000.00

CALENDAR YEAR

PER ELECTION **

							SCHE		
Schedule B – Part 1	Amo	Amounts may be rounded to whole dollars.					CALIFORN		
Loans Received			from07/0	1/2020	FORM				
SEE INSTRUCTIONS ON REVERSE					through09/1	9/2020	Page9		
NAME OF FILER							I.D. NUMBER		
Evelyn Chua for City Council 2020							1425324		
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN		
Evelyn Chua Milpitas, CA 95035	HR Consultant Self			PAID \$0.00 FORGIVEN		% RATE	\$_1,000.00		
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$1,000.00	\$0.00	\$0.00	DATE DUE	\$	02/20/2020 DATE INCURRED		
Evelyn Chua Milpitas, CA 95035	HR Consultant Self			PAID \$ 0.00 FORGIVEN	\$_15,000.00	RATE	\$_15,000.00		
[†] ☑ IND □ COM □ OTH □ PTY □ SCC		\$_15,000.00	\$	\$0.00	DATE DUE	\$0.00	06/16/2020 DATE INCURRED		
				PAID	\$	%	\$		
		\$	\$	FORGIVEN \$.	RATE \$			
^T ☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					DATE DUE		DATE INCURRED		

SUBTOTALS \$

0.00\$

Schedule B Summary

(Enter (e) on Schedule E, Line 3)

0.00

16,000.00\$

0.00\$

1.	Loans received this period\$;	0.00
	(Total Column (b) plus unitemized loans of less than \$100.)		
2.	Loans paid or forgiven this period\$ (Total Column (c) plus loans under \$100 paid or forgiven.) (Include loans paid by a third party that are also itemized on Schedule A.)	i	0.00
3.	Net change this period. (Subtract Line 2 from Line 1.)		0.00 (May be a negative number)

†Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

*Amounts forgiven or paid by another party also must be reported on Schedule A. ** If required.

Enter the net here and on the Summary Page, Column A, Line 2.

FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

Schedule E	
Payments Made	

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

	SCHEDULE E		
Statement covers period	CALIFORNIA / CO		
from07/01/2020	FORM TOO		
through09/19/2020	Page of14		
	I.D. NUMBER		
	1425324		

NAME OF FILER

Evelyn Chua for City Council 2020

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)
LII	campaign incrature and mailings	1 131	print add	VVLD	information technology costs (internet, e mail)

NAME AND ADDR (IF COMMITTEE, ALSO I		DE OI	R DESCRIPTION OF PAYMENT	AMOU	INT PAID
The Milpitas Beat Milpitas, CA 95035	PR	RT			1,200.00
ABC Printing Co. Milpitas, CA 95035	СМ	MP	Campaign Banners		218.00
Docs and Images Santa Clara, CA 95050			30-Day On Demand Design		299.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL\$ 1,717.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)\$_	12,944.79
2. Unitemized payments made this period of under \$100\$_	45.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)\$_	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	12,989.79

Schedule E	
(Continuatio	n Sheet)
Payments M	ade

Statement covers period		CALIFORNIA 460
from	07/01/2020	FORM 400
through	09/19/2020	Page11 of14
		I.D. NUMBER

1425324

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Evelyn Chua for City Council 2020

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs MTG meetings and appearances campaign consultants RFD returned contributions CNS CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries PET petition circulating CVC civic donations TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals

PHO phone banks

ND fundraising events

POL polling and survey research

TRS staff/spouse travel, lodging, and meals

LEG legal defense PRO professional services (legal, accounting) VOT voter registration

IT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Docs and Images Santa Clara, CA 95050	30-Day (On Demand Design	299.00
Docs and Images Santa Clara, CA 95050	30-Day 1	Webpage Setup & Edit	479.20
Docs and Images Santa Clara, CA 95050	5000 pcs	s 100lb Cardstock	699.78
Docs and Images Santa Clara, CA 95050	3 pcs Ot	utdoor 6x4 Vinyl banners	151.00
SCC Registrar of Voters San Jose, CA 95112	Voter L:	ist	129.00

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

1,757.99

Schedule E	
(Continuation Sheet))
Payments Made	

Statement covers period		CALIFORNIA 160
from	07/01/2020	FORM TOO
through_	09/19/2020	Page12 of14
		I.D. NUMBER
		1425324

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Evelyn Chua for City Council 2020

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs MTG meetings and appearances campaign consultants RFD returned contributions CNS CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals polling and survey research staff/spouse travel, lodging, and meals fundraising events

independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense professional services (legal, accounting) VOT voter registration

campaign literature and mailings WEB information technology costs (internet, e-mail) LIT PRT print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Docs and Images Santa Clara, CA 95050		5000 pcs 801b Text Stock-General & Sunnyhills flyers	490.50
City of Milpitas MILPITAS, CA 95035		Registrar of Voters Ballot Statement	2,890.00
Docs and Images Santa Clara, CA 95050		5 pcs Outdoor 6x4 Vinyl banners	230.70
Docs and Images Santa Clara, CA 95050		<5000 Mailers prepared & delivered to USPS	250.00
Daisy Castro San Jose, CA 95112	WEB	website	100.00

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

3,961.20

Schedule E	
(Continuation Sheet)	
Payments Made	

Statement covers period	CALIFORNIA 160
from07/01/2020	FORM 400
through09/19/2020	Page13 of14
	I.D. NUMBER
	1425324

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Evelyn Chua for City Council 2020

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs MTG meetings and appearances campaign consultants RFD returned contributions CNS CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries PET petition circulating CVC civic donations TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals staff/spouse travel, lodging, and meals fundraising events polling and survey research independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor

LEG legal defense PRO professional services (legal, accounting) VOT voter registration

IT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Docs and Images Santa Clara, CA 95050		Postage; 4,512 Addresses	798.57
Docs and Images Santa Clara, CA 95050		100 pcs Flyers-Dr Galang 100 lb Cardstock	63.38
Docs and Images Santa Clara, CA 95050		20 pcs Outdoor 5x3 Vinyl banners	515.13
	LIT		2,721.96
- ABC Printing Co. Milpitas, CA 95035	СМР	flyers	451.53

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

4,550.55

Schedule E	
(Continuation Sheet)
Payments Made	-

Statem	ent covers period	CALIFORNIA 160
from	07/01/2020	FORM TOU
through_	09/19/2020	Page14 of14
		I.D. NUMBER
		1425324

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Evelyn Chua for City Council 2020

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs meetings and appearances campaign consultants RFD returned contributions CNS CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals polling and survey research staff/spouse travel, lodging, and meals fundraising events POL

IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services

LEG legal defense PRO professional services (legal, accounting)

TSF transfer between committees of the same candidate/sponsor VOT voter registration

LIT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Docs and Images Santa Clara, CA 95050		30-Day Website Maintenance	479.20
Docs and Images Santa Clara, CA 95050		30-Day On Demand Design	299.00
Docs and Images Santa Clara, CA 95050		Flyers: 150 pcs Mobilodge, 200 pcs Friendly	179.85

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

958.05

Recipient Committee		_			COVER PAGE
Campaign Statement Cover Page (Government Code Sections 84200-84216.5)			Date Stamp	CALIFORM FORM	HA 460
	Statement covers period from01/01/2020	Date of election if applicable: (Month, Day, Year)	07/17/2020 11:34:16 Filing ID: 191159480	Page1	of 8
SEE INSTRUCTIONS ON REVERSE	through 06/30/2020	- 11/03/2020			
1. Type of Recipient Committee: All Committees - C	Complete Parts 1, 2, 3, and 4.	2. Type of Statement:		<u> </u>	
 State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored 	Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Ter Amendment (Explain bel	mination)	Quarterly Statement Special Odd-Year Re Supplemental Preelec Statement - Attach Fo	ction
3. Committee Information	D. NUMBER 1425324	Treasurer(s)		3	
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE		NAME OF TREASURER		 	
Evelyn Chua for City Council 2020		Arsenio Iloreta MAILING ADDRESS			
STREET ADDRESS (NO P.O. BOX)		CITY	STATE Z	IP CODE AF	REA CODE/PHONE
		Milpitas	CA	95035	(408) 946-6438
CITY STATE ZIP C	ODE AREA CODE/PHONE	NAME OF ASSISTANT TREASURE	R, IF ANY		
Milpitas CA 950	, ,		:		
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.	BOX	MAILING ADDRESS			
CITY STATE ZIP C	ODE AREA CODE/PHONE	CITY	STATE Z	IP CODE AF	REA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRE	SS		
chua4evelyn@gmail.com		ariloreta@aol.com			
I. Verification I have used all reasonable diligence in preparing and reviewir under penalty of perjury under the laws of the State of Californ	ng this statement and to the best of my kr bia that the foregoing is true and correct.	nowledge the information contained here	in and in the attached sc	hedules is true and co	mplete. I certify
Executed on	ByArsenio Il	oreta Signature of Treasurer or Assistant Tr	BB SUFEF		
Executed on	ByEvelyn Chu Signature of Co	-		onsor	
Executed on	Ву	Signature of Controlling Officeholder, Candidate, Stat	e Measure Proponent		
Executed on	Ву	5000 62			
Date		Signature of Controlling Officeholder, Candidate, Stat	e Measure Proponent	EDDC FA	460 / Jan/2016

FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

Recipient Committee Campaign Statement Cover Page — Part 2

COVER	PAGE - PART 2
CALIFORNIA FORM	460
Page2	of8

Officeholder or Candidate Controll	ed Committee	6.	Primarily Formed Ball	ot Measure	Committee	
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE			· · · · · · · · · · · · · · · · · · ·
Evelyn Chua						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION			BALLOT NO. OR LETTER	JURISDICT	ION	SUPPORT
City Council Member City Council: (OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND ST			Identify the controlling of	ficeholder, ca	andidate, or state meas	ure proponent, if a
	Milpitas CA 95035		NAME OF OFFICEHOLDER, CAI	NDIDATE, OR P	ROPONENT	
Related Committees Not Included into included into included in this statement that are control contributions or make expenditures on behalf	lled by you or are primarily formed to receive		OFFICE SOUGHT OR HELD	_	DISTRICT	NO. IF ANY
COMMITTEE NAME	I.D. NUMBER					
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS	CONTROLLED COMMITTEE? YES NO S (NO P.O. BOX)	7.	Primarily Formed Can officeholder(s) or candidate(s) for which th	ceholder Committee is committee is primarily OFFICE SOUGHT OR HE	formed.
CITY STATE	ZIP CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR (CANDIDATE	OFFICE SOUGHT OR HE	LD SUPPORT
OMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR C	CANDIDATE	OFFICE SOUGHT OR HE	
AME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR C	CANDIDATE	OFFICE SOUGHT OR HE	LD SUPPORT
COMMITTEE ADDRESS STREET ADDRESS	(NO P.O. BOX)					
CITY STATE	ZIP CODE AREA CODE/PHONE		Attac	ch continuati	on sheets if necessary	

Campaign Disclosure Statement Summary Page

Amounts may be rounded

		SUMMARY PAGE
Statem	ent covers period	CALIFORNIA 460
from	01/01/2020	FORM TOO
through	06/30/2020	Page3 of8
	· · · · · · · · · · · · · · · · · · ·	I.D. NUMBER

to whole dollars. SEE INSTRUCTIONS ON REVERSE NAME OF FILER Evelyn Chua for City Council 2020 1425324 Column A Column B **Calendar Year Summary for Candidates Contributions Received** TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) CALENDAR YEAR TOTAL TO DATE Running in Both the State Primary and **General Elections** Date

1. Monetary Contributions	\$ 16,000.00 16,270.00 0.00 16,270.00	\$ \$	270.00 16,000.00 16,270.00 0.00 16,270.00	20. Contributions Received \$ \$ 21. Expenditures Made \$ \$ Expenditure Limit Summary for State
6. Payments Made	\$ 0.00 2,005.37 0.00 0.00	\$	2,005.37 0.00 2,005.37 0.00 0.00 2,005.37	Candidates 22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date (mm/dd/yy) \$
Current Cash Statement 12. Beginning Cash Balance Previous Summary Page, Line 16 13. Cash Receipts Column A, Line 3 above 14. Miscellaneous Increases to Cash Schedule I, Line 4 15. Cash Payments Column A, Line 8 above 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 If this is a termination statement, Line 16 must be zero. 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ 28.00 2,005.37 14,292.63	ame core from repe Col figu sub peri the for	calculate Column B, add counts in Column A to the responding amounts in Column B of your last ort. Some amounts in umn A may be negative res that should be tracted from previous iod amounts. If this is first report being filed this calendar year, only your the amounts	*Amounts in this section may be different from amounts reported in Column B.

from Lines 2, 7, and 9 (If

any).

16,000.00

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Cash Equivalents and Outstanding Debts

18. Cash Equivalents See instructions on reverse 19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$

Schedule		Amoun	ts may be rounded	,			SCHEDULE		
Monetary Contributions Received			whole dollars.	Statement covers period from01/01/2020			CALIFORNIA 460		
	ONS ON REVERSE			through _06/30/2	020	Page	e 4 of 8		
NAME OF FILER	52				-	I.D. N	UMBER		
Evelyn Chua	for City Council 2020					1425	324		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)		
03/03/2020	Delia Galvante San Jose, CA 95132	⊠IND □COM □OTH □PTY □SCC	Retired Retired	200.00		200.00	G2020 \$200.		
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				ić:			
	ia a	☐IND ☐COM ☐OTH ☐PTY ☐SCC					æ		
		□IND □COM □OTH □PTY □SCC							
e?		□IND □COM □OTH □PTY □SCC		2					
			SUBTOTAL\$	200.00	antse on a				
. Amount rec	A Summary eived this period – itemized monetary contributions. Schedule A subtotals)		_		IND-1	ibutor C	al		

2. Amount received this period – unitemized monetary contributions of less than \$100\$

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PTY - Political Party

270.00

(other than PTY or SCC)

OTH - Other (e.g., business entity)

SCC - Small Contributor Committee

3. Total monetary contributions received this period.

Schedule B - Part 1	Amounts may be rounded				Statement covers period					
Loans Received	A.III		1/2020	CALIFORNIA 460						
							1 Ortin	<u> </u>		
SEE INSTRUCTIONS ON REVERSE					through06/3	0/2020	Page5	of <u>8</u>		
NAME OF FILER	·						I.D. NUMBER	-		
Evelyn Chua for City Council 2020							1425324			
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN IND!VIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAI OR FORGIVE THIS PERIO	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTION: TO DATE		
Evelyn Chua Milpitas, CA 95035	HR Consultant Self			PAID				CALENDAR YEAR		
				\$ 0.0	0 \$ 1,000.00	%	1,000.00	\$ 16,000.00		
				FORGIVEN		RATE		PER ELECTION*		
TIND COM OTH PTY SCC		\$0.00	\$ 1,000.00	\$0.0	DATE DUE	\$ 0.00	02/20/2020 DATE INCURRED	\$G2020 16,000.		
Evelyn Chua Milpitas, CA 95035	HR Consultant Self			PAID				CALENDAR YEAR		
				\$0.0	<u>s 15,000.00</u>	RATE %	s 15,000.00	\$ 16,000.00		
				FORGIVEN		NAI C		PER ELECTION*		
TE IND COM OTH PTY SCC	w .	\$0.00	\$_15,000.00	s0.0	DATE DUE	\$ 0.00	06/16/2020 DATE INCURRED	\$G2020 16,000.		
				PAID				CALENDAR YEAR		
				\$	_ \$	RATE	s	\$		
				FORGIVEN		IONIE		PER ELECTION*		
† IND COM OTH PTY SCC		\$	s	s	DATE DUE	\$	DATE INCURRED	\$		
		SUBTOTALS \$	16,000.00	0.	00\$ 16,000.00	\$ 0.0	0			
Schedule B Summary						(Enter (e) on Schedule E, Line 3)				
Loans received this period (Total Column (b) plus unitemized loan		••••••	••••••	\$	16,000.00	_	Contributor Codes			
Loans paid or forgiven this period (Total Column (c) plus loans under \$100 (Include loans paid by a third party that) paid or forgiven.)			\$	0.00		ND - Individual COM - Recipient Co	ommittee PTY or SCC) business entity)		
3. Net change this period. (Subtract Line Enter the net here and on the Summar	e 2 from Line 1.)y Page, Column A, Line 2.			NET \$	16,000.00 May be a negative number)		CC – Small Contrib			

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** If required.

*Amounts forgiven or paid by another party also must be reported on Schedule A.

Schedule E Payments Made	Amounts may be rounded to whole dollars.	-	SCHEDULE I
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		through Page	_6 of8
Evelyn Chua for City Council 2020		2*	NUMBER 5324
CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* PC	BR member communications TG meetings and appearances FC office expenses FT petition circulating HO phone banks DL polling and survey research postage, delivery and messenger services FO professional services (legal, accounting)	RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production of TRC candidate travel, lodging, and meals TRS staff/spouse travel lodging, and meals	als same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
ABC Printing Co. Milpitas, CA 95035	СМР		212.55
Vistaprint Waltham, MA 92451	POS Mailing		5.45
Vistaprint Waltham, MA 92451	POS postcards	<u> </u>	56.03
* Payments that are contributions or independent expenditures must Schedule E Summary	also be summarized on Schedule D.	SUBTOTAL	\$ 274.03

2. Unitemized payments made this period of under \$100\$

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)......\$

26.34

0.00

2,005.37

Schedule	E	
(Continuat	tion	Sheet)
Payments	Mad	de

SCHEDULE E	(CONT.)
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Payments Made Amounts may be rounded to whole dollars.			from 01/01/2020	CALIFORNIA 460	
		28 €		from 01/01/2020	
SEE INSTRUCTIONS ON REVERSE				through06/30/2020	Page 7 of 8
NAME OF FILER				***	I.D. NUMBER
Evelyn Chua for City Council 2020	<u>. </u>			<u> </u>	1425324
CODES: If one of the following codes accurately describe CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member com MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and s POS postage, del	munications d appearance uses lating survey resea livery and me	es	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and pro Candidate travel, lodging, ar TRS staff/spouse travel, lodging,	n costs duction costs nd meals and meals and meals es of the same candidate/spons
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DES	CRIPTION OF PAYMENT	AMOUNT PAID
Vistaprint Waltham, MA 92451		POS	postcards		46.
Super Cheap Signs Austin, TX 78758		СМР	**	₽	242.
ABC Printing Co. Milpitas, CA 95035		POS	18X24 yard signs	with wires	1,417.
				-	
					92
		SO#			
* Payments that are contributions or independent expenditures must also	o be summarized on	Schedule D.		SL	JBTOTAL \$ 1,705.

MISCEIIANEOUS IN	ncreases to Cash	Amounts may be rounded to whole dollars.	Statement covers period from01/01/2020	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE			through 06/30/2020	Page 8 of 8
IAME OF FILER				I.D. NUMBER
Evelyn Chua for City	Council 2020			42
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DE	SCRIPTION OF RECEIPT	AMOUNT OF
				INCREASE TO CASH
	JA .	2		
2			0	6
	t _A			
	환 급			36
		6.0		
				in
Attach additional inform	nation on appropriately labeled continuation sheets.		SUBTOTAL	\$
chedule I Summa	ry			
Itemized increases to	o cash this period		\$ 0.00	1
Unitemized increase	s to cash of under \$100 this period		Φ 20.00	_
Total of all interest re	eceived this period on loans made to others. (Schedule	H. Column (a)	\$\$	•
Total miscellaneous	increases to cash this period (Add Lines 1, 2, and 3)	Enter here and an the	€91	<u> </u>
Summary Page, Line	9 14.)	river here and ou the	. TOTAL \$ 28.00	